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PATENT APPLICATION
OCKET NO. 0725.1056-001

Expedited Procedure under 37 C.F.R. 16
Examining Group 1045

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1602

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

James M. Hogle, Harmon J. Zuccola, David Filman and Carl Elk

Application No.:

09/347,175

Group Art Unit: 1645

Filed:

July 1, 1999

Examiner: R. Zeman

For:

OLIGOMERIZATION OF HEPATITIS DELTA ANTIGEN

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202

on July 15, 2002 Judy Breen
Date Signature

Judy Breen
Typed or printed name of person signing certificate

Assistant Commissioner for Patents
P.O. Box 2327
Arlington, VA 22202

Sir:

Transmitted herewith is An Amendment After Final for filing in the above-identified application.

[] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

	(COL. 1) CLAIMS REMAINING AFTER AMENDMENT		(COL. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(COL. 3) PRESENT EXTRA
TOTAL	57	MINUS	* 57	0
INDEP	13	MINUS	** 13	0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

* not fewer than 20
** not fewer than 3

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE	RATE	ADDIT. FEE
X \$ 9	\$	X \$18	\$ 0
X \$42	\$	X \$84	\$ 0
+ \$140	\$	+ \$280	\$

TOTAL = \$ 0

TOTAL = \$ 0

09/347,175

-2-

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees: _____ _____	\$ _____ \$ _____
		TOTAL: \$ <u> 0 </u>

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees: _____ _____	\$ _____ \$ _____
		TOTAL: \$ <u> 0 </u>

[X] A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By 
Carolyn S. Elmore
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Concord, Massachusetts 01742-9133

Dated: 7/13/02